

REDACTED - FOR PUBLIC INSPECTION

VIA ECFS

June 27, 2017

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, S.W. Washington, D.C. 20554

Re: FCC Form 481 - Carrier Annual Reporting Data Collection

WC Docket No. 14-58

Trumansburg Telephone Company (SAC: 150131)

Dear Secretary Dortch:

On behalf of Trumansburg Telephone Company, Latitude Telcom Consultants LLC hereby files a redacted version of the company's FCC Form 481 Carrier Annual Reporting Data Collection, as required by 47 C.F.R. § 54.313 and 54.422 of the Commission's rules.

Confidential responses regarding 47 C.F.R. §54.313(f)(2) financial information are being filed separately under the Protective Order adopted in this proceeding.

The FCC Form 481 has been submitted to USAC via its e-file system and a copy of the submission is also being provided to the state commission. Please contact me at (518) 369-2454, or davew@latitude-LLC.com, if you have any questions regarding this filing.

Sincerely,

/S/ David Waters

David Waters Latitude Telcom Consultants LLC

Phone: 518.443.2801 | Fax: 518.445.6286 | Email: kevins@Latitude-LLC.com | Web: www.Latitude-LLC.com

FCC For	m 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	David Waters	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5183692454 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	davew@latitude-llc.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

Data Coll	ection Form									2013	-0980) OIVIB CONTO N	0. 3000-0819
<010>	Study Area Co	ode				150131	150131					
<015>	Study Area Na	ame				TRUMANSBURG	TEL CO.					
<020>	Program Year					2018						
<030>	Contact Name	e - Person USAC	should contac	t regarding this	data	David Water	's					
<035>	Contact Telen	hone Number -	- Number of ne	rson identified	in data line <0	30> 5183692454	ext.					
<039>		Address - Ema					ude-llc com					
<u> </u>	COIItact Lilian	Address - Lilla	ii Address or pe	rison identified	iii data iiile <0	30> daveweidele						
<210>	For the prior	r calendar yea	ar, were there	any reportal	ole voice servi	ice outages?	No					
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
	NORS									Did This Outage		
	Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures

	ulfilled Service Request ection Form			FCC Form 481 OMB Control No. 3060-0986/OM July 2013	B Control No. 3060-0819
<010>	Study Area Code		150131		
<015>	Study Area Name		TRUMANSBURG TEL CO.		
<020>	Program Year		2018		
<030>	Contact Name - Person USAC should contact reg	garding this data	David Waters		
<035>	Contact Telephone Number - Number of persor	identified in data line <030>	5183692454 ext.		
<039>	Contact Email Address - Email Address of person	n identified in data line <030>	davew@latitude-llc.com		
<300> U	nfulfilled service request (voice)		0		
<310> [Detail on attempts (voice)				
		Nam	e of Attached Document		
<320>	Unfulfilled service request (broadband)		3		
		150131ny330.pdf			
<330>	Detail on attempts (broadband)				
		N	Name of Attached Document		

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should conta	act regarding this data David Waters	
<035>	Contact Telephone Number - Number of p <030>	erson identified in data line 5183692454 ext.	
<039>	Contact Email Address - Email Address of p <030>	Derson identified in data line davew@latitude-llc.com	
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or of	telephony service in the prior Offered only fixed voice hyou are designated an ETC for	
<410>	Complaints per 1000 customers for fixed v	oice 0.0	
<420>	Complaints per 1000 customers for mobile	e voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or greathe prior calendar year for each service are an ETC for any facilities you own, operate,	eater) for broadband service in Offered only fixed broadband ea in which you are designated	
<440>	Complaints per 1000 customers for fixed b	proadband 0.0	
<450>	Complaints per 1000 customers for mobile	e broadband	

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013			
<010>	Study Area Code	150131				
<015>	Study Area Name	TRUMANSBURG TEL CO.				
<020>	Program Year	2018				
<030>	Contact Name - Person USAC should contact regarding this data	David Waters				
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.				
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com				
<500>	<500> Certify compliance with applicable service quality standards and consumer protection rules Yes					
		150131ny510.pdf				
<510> Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance						
<515>	<515> Certify compliance with applicable minimum service standards					

	unctionality in Emergency Situations ollection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	David Waters	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	·
<610>	Descriptive document for Functionality in Emergency Situations	150131ny610.pdf	

(700) Price Offerings including Voice Rate Data		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	150131	
<015> Study Area Name	TRUMANSBURG TEL CO.	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	David Waters	
<035> Contact Telephone Number - Number of person identified in data	ine <030> 5183692454 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> davew@latitude-llc.com	
<701> Residential Local Service Charge Effective Date 1/1/2017 702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
					See at	tached worksheet			
						laciica wornsiicel			
!									

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	50131
<015>	Study Area Name	TRUMANSBURG TEL CO.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	David Waters
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attac	hed				
				worksheet -	1				

	perating Companies Ilection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this	data David Waters	
<035>	Contact Telephone Number - Number of person identified in	n data line <030> 5183692454 ext.	
<039>	Contact Email Address - Email Address of person identified i	in data line <030> davew@latitude-llc.com	
<810>	Reporting Carrier Trumansburg Telephone Compar	ıy, Inc.	
<811>	Holding Company Trumansburg Telephone Co., 1	Inc./Ontario Telephone Co., Inc.	

<812> Operating Company

Trumansburg Telephone Company, Inc.

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
-			
-			
-	See atta	ached workshe	et
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(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Sud Concession Form	July 2013
<010> Study Area Code	150131
<015> Study Area Name	TRUMANSBURG TEL CO.
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	David Waters 5183692454 ext.
<035> Contact Telephone Number - Number of person identified in data line <030>	
<039> Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com
<900> Does the filing entity offer tribal land services? (Y/N)	No
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxe to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	Select Yes or No or Not Applicable
<921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning;	
<923> Marketing services in a culturally sensitive manner;	
<924> Compliance with Rights of way processes	
<925> Compliance with Land Use permitting requirements	
<926> Compliance with Facilities Siting rules	
<927> Compliance with Environmental Review processes	
<928> Compliance with Cultural Preservation review processes	
<929> Compliance with Tribal Business and Licensing requirements.	
Compliance with tribal business and Licensing requirements.	

	oice and Broadband Service Rate Comparability lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		150131
<015>	Study Area Name		TRUMANSBURG TEL CO.
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		David Waters
<035>	Contact Telephone Number - Number of person identified in data line	<030>	5183692454 ext.
<039>	Contact Email Address - Email Address of person identified in data line	e <030>	davew@latitude-llc.com
<1000>	Voice services rate comparability certification	Yes	s
<1010>	Attach detailed description for voice services rate comparability compliance	1501	131ny1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		s - Pricing is no more than the most recent applicable benchmark announced by e Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	15013	.31ny1030.pdf
			Name of Attached Document

-	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	David Waters	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	erms and Condition for Lifeline Customers		FCC Form 481
Lifeline			OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form		July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	David Waters	
<035>	Contact Telephone Number - Number of person identified in data line <030		
<039>	Contact Email Address - Email Address of person identified in data line <03	0> davew@latitude-llc.com	
		150131ny1210.pdf	
		150151My1210.pdf	
.1210	Towns 0. Constitutions of Matter Talledon at Lifetime Plane		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
			Name of Attached Document
<1220>	Link to Public Website		
\1220>	Link to Public Website HTTP		
	·		
"Please c	neck these boxes below to confirm that the attached document(s), on line 1210,		
	bsite listed, on line 1220, contains the required information pursuant to		
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must		
annually			
aimaany	cport.		
<1221>	Information describing the terms and conditions of any voice		
	telephony service plans offered to Lifeline subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,		
_		i	
<1223>	Additional charges for toll calls, and rates for each such plan.		

Data Col	rice Cap Carrier Additional Documentation lection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	David Waters	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in		
<2023>	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

Data Collection Fo	Carrier Additional Documentation orm Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}	
<2017A>	Connect America Fund Phase II recipient?	
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.	
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)	

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	150131
<015>	Study Area Name	TRUMANSBURG TEL CO.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	David Waters
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

	Progress Report on 5 Year Plan			
(3009)	Carrier certifies to 54.313(f)(1)(iii)			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}	Ye	es - Attach Certifica	150131ny3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Docun	nent Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community A	Anchors	
(3012B)	Please Provide Attachment	Name of Attached Docum	ment Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	Information (Yes/No)	OO	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	\circ	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications			
(3016)	Borrowers) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docum Information	nent Listing Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	• •	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		· ·	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		~	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Docun	nent Listing Required	150131ny3026.pdf

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	150131
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<020>	Program Year	2018
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<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com

Financial Data Summary	45992297
(3027) Revenue	
(3028) Operating Expenses	44381714
(3029) Net Income	1610583
(3030) Telephone Plant In Service(TPIS)	73153475
(3031) Total Assets	60668032
(3032) Total Debt	14516166
(3033) Total Equity	13914355
(3034) Dividends	6721

(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	150131
<015>	Study Area Name	TRUMANSBURG TEL CO.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	David Waters
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<039>	Contact Email Address - Email Address of person identified in data li	ne <030> davew@latitude-llc.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
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<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013	
<010>	Study Area Code	150131	
<015>	Study Area Name	TRUMANSBURG TEL CO.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	David Waters	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier I certify that (Name of Agent) Latitude Telcom Consultants, LLC is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.		
Name of Authorized Agent: Latitude Telcom Consultants, LLC		
Name of Reporting Carrier: TRUMANSBURG TEL CO.		
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2017	
Printed name of Authorized Officer: Sean Socha		
Title or position of Authorized Officer: CFO		
Telephone number of Authorized Officer: 5854336666 ext.		
Study Area Code of Reporting Carrier: 150131 Filing	Due Date for this form: 07/03/2017	
, ,	eiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment ited States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients of the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reporter.			
Name of Reporting Carrier: TRUMANSBURG TEL CO.			
Name of Authorized Agent Firm: Latitude Telcom Consultants, LLC			
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/26/2017	
Name of Authorized Agent Employee: Latitude Telcom Consultants, LLC			
Title or position of Authorized Agent or Employee of Agent Cost & Regulatory Consultant			
Telephone number of Authorized Agent or Employee of Agent: 5183692454 ext.			
Study Area Code of Reporting Carrier: 150131 Filing Due Date for this form: 07/03/2017		·	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S 18 of the United States Code, 18 U.S.C. § 1001.	.C. §§ 502, 503(b), or	fine or imprisonment under Title	



(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	150131
<015>	Study Area Name	TRUMANSBURG TEL CO.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	David Waters
<035>	Contact Telephone Number - Number of person identified in data line <030)> 5183692454 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030	0> davew@latitude-llc.com
<701>	Residential Local Service Charge Effective Date 1/1/20	017
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<bs< th=""><th><c></c></th></bs<>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
NY	532		FR	23.0	0.0	0.0	0.0	23.0
NY	869		FR	23.0	0.0	0.0	0.0	23.0
NY	387		FR	23.0	0.0	0.0	0.0	23.0

(710) Broadband Price Off	ering
Data Collection Form	

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	150131
<015>	Study Area Name	TRUMANSBURG TEL CO.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	David Waters
<035>	Contact Telephone Number - Number of person identified in data line <030>	5183692454 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	davew@latitude-llc.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	NY	ALL	41.95	0.0	41.95	1.5	0.256	999999	Other, Other, No Action
	NY	ALL	51.95	0.0	51.95	3.0	0.512	999999	Other, Other, No Action
	NY	ALL	61.95	0.0	61.95	6.0	0.768	999999	Other, Other, No Action
							l		

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		150131
<015>	Study Area Name		TRUMANSBURG TEL CO.
<020>	Program Year		2018
<030>	Contact Name - Person US	AC should contact regarding this data	David Waters
<035>	Contact Telephone Number	er - Number of person identified in data line <030>	5183692454 ext.
<039>	Contact Email Address - Er	nail Address of person identified in data line <030>	davew@latitude-llc.com
<810>	Reporting Carrier	Trumansburg Telephone Company, Inc.	
<811>	Holding Company	Trumansburg Telephone Co., Inc./Ontario Te	lephone Co., Inc.
<812>	Operating Company	Trumansburg Telephone Company, Inc.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	Finger Lakes Communications Group, Inc.		FLCG
_	Finger Lakes Technologies Group, Inc.		FLTG
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Unfulfilled Service Requests (Broadband) FCC Form 481, Line 330

Detail on Attempts:

All available HIDS were full at the time the customers requested service. A request was submitted to Engineering for additional equipment. Once the additional equipment was delivered installation of the equipment was scheduled and installed allowing these three requests to be fulfilled.

Trumansburg Telephone Company, Inc.
Service Quality Standards & Consumer Protection Rules Compliance
FCC Form 481, Line 510

The company complies with applicable service quality standards and consumer protections by (1) maintaining and submitting monthly trouble report data to the New York State Public Service Commission ("NYPSC"); (2) reporting major service interruptions to the NYPSC in a manner consistent with its guidelines; (3) filing local service tariffs with the NYPSC and making rate and service information available to the public upon request; (4) clearly listing all charges and credits on customers' bills; (5) providing full and prompt investigation of, and response to, customer complaints; (6) providing access to enhanced 911 emergency report centers; (7) participating in statewide system for the hearing impaired; (8) complying with federal CPNI rules and other applicable consumer privacy protection requirements, including training of employees that have access to CPNI on the rules and procedures for protecting account information and authenticating callers; and (9) implementing procedures that are consistent with the FTC's guidance on measures to detect/prevent identity theft (Red Flag).

In addition, the company complies with applicable consumer protections identified in 47 C.F.R. Part 8 for its broadband internet services including, but not limited to, §8.3, §8.5 and §8.7 addressing transparency, blocking and discrimination protections, respectively.

Functionality in Emergency Situations

FCC Form 481, Line 610

Trumansburg Telephone Company's central offices are equipped with on-site battery

back-up estimated to run 3-12 hours without live power. Additional on-site standby

diesel generators are capable of providing standby AC power and have at least a 24-hour

fuel supply. Remote electronic cabinets contain battery backup with an 8 hour estimated

run time. Larger capacity cabinets (greater that 250 lines) have on-site standby

generators, and all cabinets have a generator tap to provide generator capability. In

addition to supporting its voice network, the company's emergency generators and/or

batteries would also be used to support its broadband network in the event of an extended

power outage.

Traffic between Trumansburg Telephone Company's central offices is carried on SONET

or other similar ring technology which provides for automatic rerouting of traffic around

a failed network path. Outbound trunk groups are provisioned on two disparate paths to

Verizon's LATA tandem office.

Trumansburg Telephone Company's trunking is engineered to maintain 50-60%

utilization levels during peak traffic periods, which provides enough overhead to handle

spikes in traffic due to emergency situations.

Description of Voice Services Rate Comparability FCC Form 481, Line 1010

Rates in Effect as of: January 1, 2017

	Residential	State				
	Local Service	Subscriber	State Universal	Mandatory	Federal	Total Rate
Exchange	Flat Rate	Line Charge	Service Fee	EAS Charge	SLC	and Fees
532	\$23.00	\$0.00	\$0.00	\$0.00	\$6.50	\$29.50
869	\$23.00	\$0.00	\$0.00	\$0.00	\$6.50	\$29.50
387	\$23.00	\$0.00	\$0.00	\$0.00	\$6.50	\$29.50
						\$0.00
						\$0.00

As demonstrated in the above table, the company's pricing of fixed voice services is no more than two standard deviations above the applicable national average urban rate for voice services (Reasonable Comparability Benchmark), as published annually by the Wireline Competition Bureau.

Reasonable Comparability Benchmark for Voice Service:

\$49.51

Description of Broadband Services Rate Comparability FCC Form 481, Line 1030

Rates in Effect as of: January 1, 2017

	State			Upload	
	Regulated		Download Speed	Speed	Usage Allowance,
Residential Rate	Fees	Total Rate	(Mbps)	(Mbps)	if applicable (GB)
\$61.95	0	\$61.95	6	1	N/A

As demonstrated in the above table, the company's broadband service pricing is no more than the applicable benchmark (Reasonable Comparability Benchmark), as published annually by the Wireline Competition Bureau, or is no more than the non-promotional price charged for a comparable fixed wireline service in urban areas.

Reasonable Comparability Benchmark for Broadband Service: \$71.27

TRUMANSBURG TELEPHONE COMPANY, INC.

LINE 1210 ATTACHMENT

Received: 05/30/2012 Status: EFFECTIVE Effective Date: 07/01/2012

P.S.C. No. 2 - Telephone

New York State Telecommunications Association, Inc.

Section 9

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Second Revised Page 3

Superseding First Revised Page 3

SPECIAL EQUIPMENT, SERVICES, AND PROGRAMS

A. LIFELINE TELEPHONE SERVICE

- 1. Lifeline Telephone Service Options
 - a. Description
 - 1. Lifeline Discounted Service

This service provides a flat rate federal discount of \$9.25, consisting of a \$6.50 reduction of the Federal Subscriber Line Charge and a \$2.75 reduction in the monthly rate for local exchange telephone service for residential customers. Qualified customers may choose any type or grade of local telephone service, including bundled services that are normally offered by the Company.

1 A. Additional Lifeline Discount

This service provides the discount as outlined in A.1.a.1 above and may provide an additional discount equal to the serving company's increase in residential basic local exchange service, as authorized by the NYS Department of Public Service in Case No. 07-C-0349, released March 4, 2008, whereby the NY Commission authorized certain companies to increase basic local service rates up to \$2.00 per year for 2 years. The discount can be found on Addendum 1 of the individual Company tariff for those companies offering the Additional Lifeline Discount.

Date Issued: May 30, 2012 Date Effective: July 1, 2012

Issued by: Caroline Hill, Director Tariffs

Received: 05/30/2012 Status: EFFECTIVE Effective Date: 07/01/2012

P.S.C. No. 2 - Telephone

New York State Telecommunications Association, Inc.

Section 9

First Revised Page 3.1

Superseding Original Page 3.1

SPECIAL EQUIPMENT, SERVICES, AND PROGRAMS

A. LIFELINE TELEPHONE SERVICE

(D)

Date Issued: May 30, 2012 Date Effective: July 1, 2012

Issued by: Caroline Hill, Director Tariffs

Received: 03/29/2012 Status: EFFECTIVE Effective Date: 04/29/2012

P.S.C. No. 2 - Telephone

New York State Telecommunications Association, Inc.

Section 9

First Revised Page 4

Superseding Original Page 4

SPECIAL EQUIPMENT, SERVICES, AND PROGRAMS

A. LIFELINE TELEPHONE SERVICE (cont'd)

- 1. Lifeline Telephone Service Options (cont'd)
 - b. General

Qualified customers may choose to apply the federal Lifeline credit to any of the company's local service offerings, including any local bundled service offering, basic local service, or message rate service. Message rate Lifeline service is available only where central office facilities permit. For connection of new service, service connection charges apply unless the customer qualifies for connection assistance under the Tribal Lands Link Up program.

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Service connection charges do not apply to change existing service from:

- 1. Message or flat rate services to Lifeline service.
- 2. Lifeline service to non-Lifeline services.

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Issued in Compliance with FCC Order in Dockets: WC Docket No. 11-42, WC Docket No. 03-109, CC Docket No. 96-45, WC Docket No. 12-23

Date Issued: March 29, 2012 Date Effective: April 29, 2012

Issued by: Robert R. Puckett, President

Received: 05/30/2012 Status: EFFECTIVE Effective Date: 07/01/2012

P.S.C. No. 2 - Telephone

New York State Telecommunications Association, Inc.

Section 9

First Revised Page 4.1

Superseding Original Page 4.1

SPECIAL EQUIPMENT, SERVICES, AND PROGRAMS

A. LIFELINE TELEPHONE SERVICE (cont'd)

2. Regulations

a. These services are restricted to low income residential customers. To qualify for Lifeline service a customer must certify and provide documentation as income eligible. For a consumer to be eligible under the income requirements, the consumer's household income as defined in § 54.400(f) of the FCC Rules must be at or below 135% of the Federal Poverty Guidelines for a household of that size or a recipient of benefits from any one of the following Entitlement Programs:

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- 1. Medicaid:
- 2. Supplemental Nutrition Assistance Program (SNAP) F/K/A Food stamps;
- 3. Supplemental Security Income;
- 4. Federal Public Housing Assistance (Section 8);
- 5. Low-Income Home Energy Assistance Program (LIHEAP);
- 6. National School Lunch Program's free lunch program;
- 7. Temporary Assistance for Needy Families/SafetyNet; (C)
- 8. Veterans Disability Pension
- 9. Veterans Surviving Spouse Pension

Issued in Compliance with FCC Order in Dockets: WC Docket No. 11-42, WC Docket No. 03-109, CC

Docket No. 96-45, WC Docket No. 12-23

Date Issued: May 30, 2012 Date Effective: July 1, 2012

Issued by: Robert R. Puckett, President

Received: 03/29/2012 Status: EFFECTIVE Effective Date: 04/29/2012

P.S.C. No. 2 - Telephone

New York State Telecommunications Association, Inc.

Section 9 First Revised Page 5 Superseding Original Page 5

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SPECIAL EQUIPMENT, SERVICES, AND PROGRAMS

A. LIFELINE TELEPHONE SERVICE (cont'd)

- 2. Regulations (cont'd)
 - b. The Lifeline discount is effective upon receipt of a completed form of eligibility. If the form is not returned, no further action is taken by the Company to establish eligibility.
 - c. The Company, in coordination with appropriate agencies and the Lifeline Customer, will require Lifeline customers to be re-certified, on an annual basis. Lifeline customers will need to certify that they continue to be eligible to receive these Lifeline benefits and that they are not receiving benefits from another company. If, a customer is identified as being ineligible, the customer will be notified that unless the information is shown to be in error, the Lifeline discount will be discontinued. The customer will be billed for discounts received for the time that they were proven to be ineligible for the service.
- Locality Charge Waiver
 Customers receiving Lifeline Telephone Service will have applicable locality charges waived each month while they are receiving the Lifeline Assistance.
- Voluntary Toll Blocking (Restriction)
 Customers receiving Lifeline service can voluntarily request and receive toll blocking (call restriction), third number billing/collect call restriction without a monthly charge. There will be no record order charge to add these types of restrictions (blocking).

Issued in Compliance with FCC Order in Dockets: WC Docket No. 11-42, WC Docket No. 03-109, CC Docket No. 96-45, WC Docket No. 12-23

Date Issued: March 29, 2012 Date Effective: April 29, 2012

Issued by: Robert R. Puckett, President

Addendum 1 Sixth Revised Page 1 Superseding Fifth Revised Page 1

Additional Lifeline Service Credit

Additional Lifeline Service Credit*

Ovid Exchange

Effective	Amount of Addi Credit Per Resi Local Exchange	dential Basic
January 1, 2015	\$10.35	(C)

Additional Lifeline Service Credit*

Interlaken & Trumansburg Exchanges

Effective	Amount of Addition Credit Per Reside Local Exchange	ential Basic
January 1, 2015	\$7.50	(C)

Date Issued: November 25, 2014 Date Effective: January 1, 2015

Issued By: Paul Griswold, President, Phelps, New York

^{*} Issued in under the authority of the Commission Order in Case No. 09-M-0527, dated October 3, 2014.

Company Name: Trumansburg Telephone Company

Calendar Year: 2016

LIFELINE PROGRAM SERVICES (1200)

Rates in effect as of: January 1, 2017

Service or Package Name	Non-Discounted Local Rate	Lifeline Discount enter as (-)	Discounted Lifeline Rate	Total Minutes Provided	Description of Additional Toll Charges (if any)
Flat Rate Service - 532 and 387	\$23.00	-\$10.25	\$12.75	N/A	N/A
Flat Rate Service - 869	\$23.00	-\$13.10	\$9.90	N/A	N/A
			\$0.00		
			\$0.00		
			\$0.00		

Company Name: Trumansburg Telephone Company

Calendar Year: 2016

MILESTONE CERTIFICATION (3010)

As required by 47 C.F.R. Section 54.313(f)(1)(i):

I certify that I am an officer of the reporting carrier and that the carrier has taken reasonable steps to provide, upon reasonable request, broadband service at actual speeds of 10 Mbps downstream and 1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to reasonably comparable amount of time.

Name of Reporting Carrier:	Trumansburg Telephone Company		
Signature of Authorized Officer:	917V	Date: 5/18/2017	
Printed Name of Authorized Officer:	Sean Socha		
Title or Position of Authorized Officer:	CFO		
Telephone Number of Authorized Officer:	585-433-6666		
Study Area Code of Reporting Carrier:	150131		

REDACTED – FOR PUBLIC INSPECTION

TRUMANSBURG TELEPHONE COMPANY, INC.

LINE 3026 ATTACHMENT ATTACHMENT REDACTED IN ITS ENTIRETY